ENTRY BLANK		vault
PLEASE TYPE OF	R PRINT	
Ms. ☐ Mr. Artist <u>Ur</u>	rsula Schapper	t Ryan (Last Name Last
Permanent Address 2562	1 Timber Cove	
-	Daytime Tel. (216	*
Zip	Area Code	
Temporary or Studio Address		
St	treet	City
	Daytime Tel. ()	
Zip	Area Code	
-	sently live in one of the co in which county were you	
Collaborator	Polityers	
	(If Any)	
		ot sold:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This Entry Blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 21, 1985.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the Entry Information.

Signature	(1-	isular f.	KI	/an_
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DO NOT DETACH

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	Price or NFS		Insurance Value if NFS Only		Size 20" × 22 Frame			
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